FORM PTO-1083 and McPhee

In re application d

Serial No .:

10/001,596

Filed:

October 19, 2001

Art Unit:

3742 -

For:

**HUMIDITY CONTROLLER** 

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Supplemental Amendment for the above-identified application.

The filing fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amendment		Highest No, Previously Paid for	Present Extra
TOTAL	* 55	MINUS	** 55	0
INDEP.	* 3	MINUS	** 3	0 .
☐ FIRST	PRESENTAT	TON OF MU	LTIPLE DEP	. CLAIM

SMALL ENTITY

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

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<u>OR</u>

<u>OR</u>

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DATE OF DEPOSIT: December 6, 2004

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OTHER THAN A SMALL ENTITY

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TOTAL	\$.00

- If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
  - If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

	Please charge my Deposit Account No. 20-1495 in the amount of \$ A duplicate copy of this sheet is enclosed.				
	A check in the amount of \$ for the extra claim.				
Ø	A Request for a One-Month Extension of Time.				
Ø	A check in the amount of \$110.00 for the extension fee.				
Ø	The Commissioner is hereby authorized to charge payment f the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-1495. A duplicate copy of this sheet is enclosed.				
	Any filing fees required under 37 CFR 1.16 for the presentation of extra claims.				
	Any patent application processing fees under 37 CFR 1.17				
Date	ed: December 6, 2004				

Raiford A. Blackstone, Reg. 25,156 Linda L. Palomar, Reg. No. 37,903 Attorneys of Record